

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: LOVING GENERATIONS LCC (0010440)

Address: 1281 PRAIRIE AVE, BELOIT, WI 53511

License Status: REGULAR

Licensed/Certified/Registered 03/01/2004

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0094777 **End Date:** 04/01/2005 **Type:** OTHER **Purpose:** DESK REVIEW

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008160 Served 04/02/2005

Deficiencies Cited
50.065(6)(b)

Subject Area
CREDENTIALIAED CAREGIVERS

Compliance
Verified

Corrected

Survey ID: 0093374 **End Date:** 09/21/2004 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008052 Served 10/12/2004

Deficiencies Cited
88.04(5)(a)
88.05(3)(a)
88.05(4)(d)2.b
88.06(2)(a)
88.06(3)(a)
88.07(3)(d)
88.07(3)(e)2
88.10(2)

Subject Area
TRAINING-15 HOURS WITHIN 6 MONTHS
HOME ENVIRONMENT
FIRE EVACUATION ANNUAL EVALUATION
ADMISSION-HEALTH EXAM
INDIVIDUAL SERVICE PLAN & ASSESSMENT
MEDICATION- WRITTEN ORDER
MEDICATION- RECORD OF SIDE EFFECTS
EXPLANATION OF RESIDENT RIGHTS

Compliance
Verified

Corrected

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

DEPARTMENT OF HEALTH AND FAMILY SERVICES
Division of Disability and Elder Services
Printed 08/18/2006

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Survey ID: 0092041 **End Date:** 03/01/2004 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

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Enforcement History

Date: 04/01/2005 **SOD #**10008160 **Appealed:** No

Sanctions

COMPLY WITH REQUIREMENT

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